SCHEDULE A Form 740

KENTUCKY ITEMIZED DEDUCTIONS

↗ Attach to Form 740. **ຌ** See instructions.

2006

Your Social Security Number

Department of Revenue

Enter name(s) as shown on Form 740, page 1.

		Do not include expenses reimbursed or paid	by otners.	
Medical and	1.	Medical and dental expenses	. 1 212	
Dental	2.	Enter 7.5% (.075) of the amount from Form 740, line 92	213	
Expenses	3.	Total medical and dental. Subtract line 2 from line 1. If zero or less, enter-	0	
	4.	Local income taxes (do not include state income tax)	4 215	
Гахеs	5.	Real estate taxes	. 5 216	
Vote: Sales and use	6.	Personal property taxes	6 217	
axes are not	7.	Other taxes (list)		
eductible.			.7 218	
	8.	Total taxes. Add lines 4 through 7. Enter here 7 8		
	9.	Home mortgage interest and points reported to you on		
nterest		federal Form 1098 9	220	
xpense	10.	Home mortgage interest not reported to you on federal		
		Form 1098 (if paid to an individual, show that person's		
ote: ersonal		name and address)	224	
terest	١		221	
not deductible.	11.	Points not reported to you on federal Form 1098		
		(see instructions for special rules)		
	12.	Investment interest (attach federal Form 4952 if required)		
	13.	Total interest. Add lines 9 through 12. Enter here		
Contributions	14.	Contributions by cash or check	14 225	_
Vote:	15.	Other than cash or check (attach federal Form 8283	200	
For any contri-		if over \$500)	15 226	
oution of \$250 or more, see	16.	Artistic charitable contributions deduction		,
nstructions.		(attach schedule)		
	17.	Carryover from prior year		
	18.	Total contributions. Add lines 14 through 17. Enter here	718	
Casualty and	19.	Enter amount from attached federal Form 4684,		
Theft Losses		Section A, line 16		
	20. 21.	Enter 10% (.10) of the amount from Form 740, line 9 Total casualty or theft loss(es). Subtract line 20 from line		
	21.	If zero or less, enter -0		
	22.	Unreimbursed employee expenses—job travel, union dues,		
ob Expenses	22.	iob education, etc. (attach federal Form 2106 or 2106 FZ if		
and		3	22 233	
Most Other	23.	Tax preparation fees	23 234	
Miscellaneous	24.			
Deductions			24 235	
	25.	Add the amounts on lines 22, 23 and 24. Enter here		_
	26.		26 237	
	27.	Total. Subtract line 26 from line 25. If zero or less, enter -0-		
Other	28.	Other (see instructions) list	·	
Miscellaneous	20.	Outer (see instructions) list	7/28	
Deductions Total Itemized	-		7.20	_
July 11011112CU	1	Add lines 3, 8, 13, 18, 21, 27 and 28. Enter here		

[★] If single or married filing jointly and your income for Form 740, Column B does not exceed \$150,500, enter total itemized deductions on Form 740, line 10, Column B.

 $[\]bigstar$ All others go to page 2.

If the amount on Form 740, line 13, exceeds \$150,500 (\$75,250 if married filing separately on a combined return or separate returns), skip Part I and complete Part II.

PART I—DIVIDING DEDUCTIONS BETWEEN SPOUSES

Use this schedule if married filing separately on a combined return.

1.	Total itemized deductions from page 1, line 29.	
2.	Percent of income (Form 740, line 9, Column A) to total income (Form 740, total of line 9, Columns A and B)	241
3.	Percent of income (Form 740, line 9, Column B) to total income (Form 740, total of line 9, Columns A and B)	242
4.	Percent on line 1 times total deductions entered on page 1, line 29 (enter here and on Form 740, line 10, Column A)	243
5.	Percent on line 2 times total deductions entered on page 1, line 29 (enter here and on Form 740, line 10, Column B)	244

PART II—ITEMIZED DEDUCTIONS LIMITATION SCHEDULE

Use this schedule if the adjusted gross income on Form 740, line 9, exceeds \$150,500 (\$75,250 if married filing separately on a combined return or separate returns).

		A.		Spouse		B.		Yourself (or Joint)
(Form 740, line 9, Col	ely on a combined return, enter in Column A the percent of income umn A) to total income (Form 740, total of line 9, Columns A and B); the percent of income (Form 740, line 9, Column B) to total income 9, Columns A and B).								
• If single, married enter 100% in Col	filing a joint return or married filing separate returns, tumn B.			245				256	
	ount on Schedule A, line 29, by the ne shown in Columns A and/or B			1.	246			1.	257
plus any gambling lo multiply by the perce	Schedule A, lines 3, 12 and 21, sses included on line 28 and nt of income shown in Columns			2	247			2.	258
Note: Be sure clearly identifi	your total gambling losses are ed on line 28.			2.	241			2.	236
line 1. (If the res	ount on line 2 from the amount on sult is zero, STOP HERE ; enter the e 1 above on Form 740, line 10.)			3.	248			3.	259
4. Multiply the am	ount on line 3 above by 80% (.80)	4.	249			4.	260		
5. Enter the amoun	t from Form 740, line 9	5.	250			5.	261		
	(\$75,250 if married filing separately eturn or separate returns)	6.	251			6.	262		
line 5. (If the result is	on line 6 from the amount on zero or less, STOP HERE ; enter : 1 above on Form 740, line 10.)	7.	252			7.	263		
	ount on line 7 above by 3% (.03)	8.	253			8.	264		
the smaller of t	ounts on lines 4 and 8 above. Enter two amounts here			9.254				9.265	
	eductions. Subtract the amount on amount on line 1. Enter the result in 740, line 10			10.	255			10.	266